County of Gloucester Human Resources Manual

CHAPTER:	7 – CONDUCT AND PERFORMANCE	ADOPTED: 9/7/11
SECTION:	6 - DRUGS AND ALCOHOL	REVISED:

EXHIBIT M - REASONABLE SUSPICION CHECKLIST

This form is to be used to substantiate and document the objective facts and circumstances leading to a reasonable suspicion determination. The supervisor or designee as well as a witness should complete the checklist below.

	ident / Cause for Suspicion parent drug or alcohol intoxication		E	Body Movements Unsteady walk, poor coordination
Abr	normal or erratic behavior			Shaking hands/body tremors, twitches
	served/reported possession dispensation use of prohibited substance			Breathing irregularly - or with difficulty
Arre	est or conviction for drug related offense(s)			Loss of physical control
	dy Behavior usea or vomiting		F	Eye Bloodshot or watery
Ext	reme fatigue / sleeping on job			Dilated or constricted pupils
Diz	ziness or fainting		G	Behavioral Indicators Noted Verbal abusiveness
_ `	hly excited or nervous or of alcohol			Physical abusiveness
C Boo	dy Appearance ner very flushed or very pale			Extreme aggressiveness or unresponsiveness Inappropriate response to questioning or instructions
	cessive sweating or skin clamminess			Erratic/inappropriate behavior: hallucinations, disorientation, confusion, talkativeness, euphoric
	nouth, frequent swallowing, wetting lips quently			(circle all that apply)
	Disheveled appearance / out of uniform	Other:		
	eech rred or incoherent speech	Comments:		
Rep	petitious, rambles			
Signatu	re: Department Head/Designee/ Date			

County of Gloucester Human Resources Manual

Signature:	Witness/Date		